



State of Missouri
Department of Natural Resources
St. Louis Regional Office
10805 Sunset Office Drive, Suite 100
St. Louis, MO 63127-1017
(314) 822-0101

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VAPOR RECOVERY SYSTEM CONSTRUCTION/OPERATING PERMIT APPLICATION

Section A - General Application Information

Facility Name		County	
Facility Street Address		City	State Mail (ZIP) Code
Facility Phone No. ()	Facility Designated Person		Designated Person Phone No. ()
Owners Name		Owners Phone No. ()	
Owners Mailing Address		City	State Mail (ZIP) Code

Section B - Type of Application (Check all appropriate boxes)

- ☐ Operating Permit: ☐ Initial ☐ Renewal ☐ Post Construction
☐ Construction Permit: ☐ New Facility ☐ Existing Facility Modification/Reconstruction

Brief Description of the Planned Construction:

Section C - Stage I Information

Stage I System Type (Specify): ☐ Dual System ☐ Coaxial System

Tanks	Product Type	Tank Size	Tank Type	Vapor Line Manifolded (Yes or No)	Underground (Yes or No)
1					
2					
3					
4					

Section D - Stage II Information

System: Balance _____ Number of Nozzles: _____
Vacuum Assist _____ Number of Dispensers: _____
Other (Specify) _____ Type of Dispensers: _____
Dispenser Model No.: _____

Section E - Applicant's Certification Statement

"I certify, based on information and belief formed after reasonable inquiry, the statements and information in this document are true, accurate and complete."

Signature of Responsible Official of Facility	Date
Type or Print Name and Official Title of Signer	Telephone ()

VAPOR RECOVERY OPERATING/CONSTRUCTION PERMITS

This form is to be used for Operating and Construction Permits. A \$100.00 Dollar permit fee is to be submitted for each Construction and/or Operating Permit requested by this application. Checks should be made payable to the **MISSOURI DEPARTMENT OF NATURAL RESOURCES**. The check along with the original application and required diagrams, plans, certification, etc. should be mailed or delivered to:

Missouri Department of Natural Resources
c/o Stage II Unit Chief
10805 Sunset Office Drive, Suite 100
St Louis, Missouri 63127-1017

All permits issued through the St Louis Regional Office will be mailed to the facility owner. Copies of permits will be made available to contractors upon request.

Attach the following with your Construction Permit Application:

1. A complete site specific diagram and a thorough description of the planned construction.
2. Plumbing diagrams including product lines, vapor lines, vent lines, slope of return vapor lines, diameters of all lines, etc....
3. A list of all equipment being installed and current California Air Resources Board (CARB) Executive Order numbers for the proposed system and/or the modified system components.
4. Proof of underground storage tank registration and any other Missouri State permits that may apply.
5. Name of the contractor performing the work.

Attach the following with your Operating Permit Application:

1. Plumbing diagrams including product lines, vapor lines, vent lines, slope of return vapor lines, diameters of all lines, etc....
2. Proof of underground storage tank registration and any other Missouri State permits that may apply.